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DATE: May 25, 2006  
ATTN: Yvonne R. Abbott  
COMPANY: Patent Office - AR + Unit 3644  
FAX#: 571-273-8300  
PAGES (including cover sheet): 4

FROM: Kathryn Holtzworth  
ENTERPRISE RENT-A-CAR - SEDONA

MESSAGE:

Dear Yvonne,  
Attached are my forms for our patent.  
Attached are: transmittal form, remarks,  
& amended claim. Please call if we  
need to send anything else.  
Thank you, Kathryn Holtzworth  
Application # 10/612,694

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TRANSMITTAL FORM		ENCLOSURES (Check all that apply)	
(to be used for all correspondence after initial filing)		Application Number: 10/612,694	
Total Number of Pages in This Submission: 4		Filing Date: July 3, 2005	
		First Named Inventor: Kathryn Holtzworth	
		Art Unit: 3644	
		Examiner Name: YVONNE R. ABBOTT	
		Attorney Docket Number:	

ENCLOSURES (Check all that apply)	
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.63	Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Name	KATHRYN HOLTZWORTH ET AL
Signature	Kathryn Holtzworth
Printed name	KATHRYN HOLTZWORTH
Date	May 25, 2006

CERTIFICATE OF TRANSMISSION/MAILING	
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Signature	Kathryn Holtzworth
Typed or printed name	KATHRYN HOLTZWORTH
Date	May 25 2006

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